



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2017 AUG -4 AM 9:18

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Wade's floor Covering

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Wade Mays 921 Abigail Ct. Ammon ID. 83406

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

3. The general type of business transacted under the assumed business name is:

Retail Trade
 Wholesale Trade
 Services

Construction
 Agriculture
 Manufacturing

Transportation and Public Utilities
 Mining
 Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Wade Mays
(Name)

921 Abigail Ct.
(Address)

Ammon ID. 83406
(City) (State) (Zipcode)

5. Name and address for this acknowledgment copy is (if other than #4):

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: Wade Mays

Secretary of State use only

Signature: Wade Mays

Printed Name: _____

IDAHO SECRETARY OF STATE

08/04/2017 05:00

Signature: _____

CK:104 CT:343677 BH:1596790
1@ 25.00 = 25.00 ASSUM NAME #2

Printed Name: _____

D 196201

Signature: _____